## LII 000032457

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone i	#)
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## **COVER LETTER**

TO:	Registration Se Division of Cor			<b>.</b>
		BLE TILE COMPANY L.L.C.		;
SUBJI	ECT:	Name of Limi	ited Liability Company	<del></del>
The en	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspo	indence concerning this matter	to the following:	
		Thomas M. Tarsia, Esq.		
			Name of Person	<del></del>
		Jones, Haber & Rollings		
			Firm/Company	
		1633 SE 47th Terrace		
			Address	
		Cape Coral, FL 33904		
		tarsia@joneshaberlaw.com	City/State and Zip Code	
			to be used for future annual report	notification)
For fur	ther information c	oncerning this matter, please ca	all:	
Thoma	ns M. Tarsia, Esq.		239 542-070 at ()	
	Name o	t Person	Area Code Da	sytime Telephone Number
Enclos	ed is a check for th	ne following amount:		
<b>≡</b> \$2	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AFFORDABLE TILE COMPANY L.L.C.

(Name of the Lim	ited Liability Company as it now appea (A Florida Limited Liability Company)	ars on our records.)	
The Articles of Organization for this Limited 1	Liability Company were filed on 3/	/17/2011	and assigned
Florida document number L11000032457	·		
This amendment is submitted to amend the fol	llowing:		
A. If amending name, <u>enter the new name</u>	of the limited liability company b	<u>iere</u> :	
The new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	<del></del>	- <del></del>
Principal office address MUST BE A STRE	ET ADDRESS)	<u> </u>	~~
			021
			<b>5</b> TI
Enter new mailing address, if applicable:			JEH TI
Mailing address MAY BE A POST OFFICE	E BOX)		<u> </u>
			きし
		·	: 2
3. If amending the registered agent and/or	registered office address on our	records, <u>enter the nar</u>	ne of the new regi
igent and/or the new registered office addr	ess here:		
N. GN. B. St. J.A. and	THOMAS M. TARSIA, ESQ.		
Name of New Registered Agent:			
New Registered Office Address:	1633 SE 47th TERRACE	orida street address	
	CAPE CORAL	, Florida <u>3:</u>	3904
	City		7: C. 1

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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n effective date is list te: If the date ins	her than the date of ted, the date must be spe erted in this block doo date on the Departm	cific and cannot be p es not meet the app	olicable statutory	or more than 90 days	optional) after filing.) Pursuant to this date will not be	605.020 listed as
ecord specifies a design of the second specifies and the second s	elayed effective date,	but not an effectiv	e time, at 12:01 :	a.m. on the earlier o	f: (b) The 90th day a	ifter the
January ted	144	2021	·			
		/				

Filing Fee: \$25.00